

CERTIFICATE OF LIABILITY INSURANCE

DATE (MW/DD/YYYY) Current Date

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT Insurance Agent Information PRODUCER PHONE FAX (A/C, No). (A/C, No, Ext) E-MAIL ADDRESS: INSURANCE AGENT ISSUING CERTIFICATE ADDRESS INSURER(S) AFFORDING COVERAGE NAICE INSURER A: A-VII or better, admitted carrier INSURED INSURER B : ENTITY INSURED INSURER C ADDRESS INSURER D INSURER E INSURER F: COVERAGES CERTIFICATE NUMBER: REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR INSR LTR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER GENERAL LIABILITY **1,000**,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) X | COMMERCIAL GENERAL LIABILITY 100,000 CLAIMS-MADE X OCCUR MED EXP (Arry one person) \$ 5,000 Α POLICY NUMBER 1,000,000 start stop PERSONAL & ADV INJURY X GENERAL AGGREGATE 2,000,000 date date \$ GEN'L AGGREGATE LIMIT APPLIES PER PRODUCTS - COMP/OP AGG \$ POLICY X PRO-COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY 1,000,000 ANYAUTO BODILY INJURY (Per person) POLICY NUMBER start ALL OWNED AUTOS SCHEDULED stop BODILY INJURY (Per accident) \$ AUTOS NON-OWNED AUTOS Ά X date date PROPERTY DAMAGE \$ HIRED AUTOS (Per accident) \$ UMBRELLA LIAB OCCUR EACH OCCURRENCE \$ EXCESS LIAB CLAIMS-MADE AGGREGATE RETENTION \$ 2 WORKERS COMPENSATION WC STATU-TORY LIMITS X OTH-AND EMPLOYERS' LIABILITY POLICY NUMBER ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? start stop E L. EACH ACCIDENT \$ 1,000,000 Stop Gap/EL Only date date EL DISEASE - EA EMPLOYEE\$ 1,000,000 (Mandatory in NH) If yes, describe under
DESCRIPTION OF OPERATIONS below EL DISEASE - POLICY LIMIT \$ 1,000,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Altach ACORD 101, Additional Remarks Schedule, if more space is required) The City of Yakima and the County of Yakima, its agents, employees, authorized volunteers, elected and appointed officials are included as Primary/Non-Contributory additional insureds. See attached Additional Insured Endorsement. CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE City of Yakima/County of Yakima THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Purchasing Department 129 N. 2nd Street AUTHORIZED REPRESENTATIVE Yakima, WA 98901 SIGNATURE

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

The City of Yakima and the County of Yakima, its agents, employees, authorized volunteers, elected and appointed officials are included as Primary/Non-Contributory additional insured's.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

- A. Section II Who Is An Insured is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.
- B. With respect to the insurance afforded to these additional insureds, the following exclusion is added:
 - 2. Exclusions

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- (1) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations has been completed; or
- (2) That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.